

(WHEN FILLED IN)

☒ HANDLE VIA CODEWORD
01400700998

Approved For Release 2001/04/02 : CIA-RDP81R00560R000100070009-6

Approved For Release 2001/04/02 : CIA-RDP81R00560R0001000700090001-6					UN CHECKED												
CRS SERVICE REQUEST										1. CR CONTROL NO. 581688		2. PART # OF					
(USE FORM 1395 FOR LOAN/PURCHASE OF BOOKS/PERIODICALS)																	
[REDACTED]					4. AGENCY/OFFICE/DIVISION 001/LSD/DSB					5. REQUESTER'S DATE DAY MONTH YR 14 00 00							
6. ADDRESS (BLDG/ROOM) 25X1A					7. PHONE 4015		8. INTERMEDIARY (IF APPLICABLE) [REDACTED]			9. DATE NEEDED DAY MONTH YR 14 00 00							
10. CLASSIFICATION (HIGHEST CLASSIFICATION TO BE INCLUDED. CHECK ONE) <input checked="" type="checkbox"/> TS <input type="checkbox"/> SECRET <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> UNCLASSIFIED							11. CHANNEL (CHECK ONE) <input type="checkbox"/> CW <input type="checkbox"/> COLLATERAL <input type="checkbox"/> ALL SOURCE										
12. REQUEST STATEMENT (LIST DOCUMENT/PHOTO NUMBERS IN SEQUENCE) 25X1A One retention copy please: [REDACTED] (controlled item) 25X1A Thank you																	
CRS USE ONLY		13. EDPSP SPECIAL INSTRUCTIONS (PRIORITIES)								14. DATE NEEDED BY ISG							
15. DPSP SPECIAL INSTRUCTIONS (PRIORITIES)										16. DATE NEEDED							
										17. SEND PRODUCT TO <input type="checkbox"/> ISG ANAL <input type="checkbox"/> REQUESTER							
18. RESPONSIBLE ANALYST		19. PHONE/RM.		20. RESPONSIBLE COMP.		21. SERVICE (CODE) PROVIDED (AM'T)		1.		2.		3.		4.		5.	
22. DAY/MO. REC'D		23. DAY/MO. COMPL		24. PAGES REPRO		25. PHOTO PRINTS		26. SERVICE TIME: ANAL/LIBN _____ IA _____ CLERICAL _____ OTHER _____									
27. COUNTRY CODES				28. COORDINATED WITH													
29. FILES USED <input type="checkbox"/> BIO CARD..02 <input type="checkbox"/> BACKGRND..01 <input type="checkbox"/> C.W. PERS..37 <input type="checkbox"/> LY REF..LR <input type="checkbox"/> BIB(SOVBLOC)....03 <input type="checkbox"/> HAVECHK NAME..HN <input type="checkbox"/> CIRCOL.....CI <input type="checkbox"/> REMOTE OTHER (Specify) <input type="checkbox"/> TOWN FOLD..08 <input type="checkbox"/> BIO FOLD..04 <input type="checkbox"/> ANAL FILE..AF <input type="checkbox"/> DDP TRAVEL TF <input type="checkbox"/> LY CIR..LC <input type="checkbox"/> BIB(NEW-USSR)..BN <input type="checkbox"/> HAVECHK INST...HI <input type="checkbox"/> INTFAX.....41 <input type="checkbox"/> TERM.....RT <input type="checkbox"/> PLANT FOLD..06 <input type="checkbox"/> CAT. FILE..17 <input type="checkbox"/> PERS PHOT..12 <input type="checkbox"/> NEG. FILE.....PN <input type="checkbox"/> LY SER..LS <input type="checkbox"/> BIB(ORG-USSR)....BO <input type="checkbox"/> NSA TRAVEL.....90 <input type="checkbox"/> AEGIS SUB.50 <input type="checkbox"/> RSM.....RS																	
30. DPSP DAY/MO. IN		31. DAY/MO. OUT		32. EDPSP DAY/MO. IN		33. DAY/MO. OUT		34. ADP REFERENCES SCREENED OLD NEW CW COLL									
35. COMMENTS (INCLUDING REQUESTER REACTION)																	

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DOCUMENT DESCRIPTION	REGISTRY
SOURCE: _____	CONTROL NUMBER: _____
DATE OF DOCUMENT: _____	DATE DOCUMENT RECEIVED: _____
COPY NUMBER (S): _____	LOGGED BY: _____
NUMBER OF PAGES: _____ DOCUMENT NO: _____	
NUMBER OF ATTACHMENTS: _____	

FROM:		DATE:	
<i>CRS/CLD/TSB</i>		<i>28 May 74</i>	
<i>PH-1129</i>			
TO OFFICE	NAME	SIGNATURE	DATE
1 <i>OSI/LSD/MSB</i>	[REDACTED]		
2	<i>H-C-21</i>	25X1A	
3	<i>Nga.</i>		
4			
5			

- ☐ Approval
- ☐ Action
- ☐ Comment
- ☐ Concurrences
- ☐ Information
- ☐ Direct Reply
- ☐ Preparation of Reply
- ☐ Recommendation
- ☐ Signature
- ☐ Return
- ☐ Dispatch
- ☐ File

REMARKS

Handle via Comint Channels

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